COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL020651 US

As a below named inventor, I h	ereby declare that:		
My residence, post office addre	ess and citizenship are as state	ed next to my name.	
	of the subject matter which is o g device"	name is listed below) or an original, claimed and for which a patent is so	
is attached hereto.			
was filed as United States a	application		
Serial No			
on -			
and was amended			7.0
on			
🗓 was filed as PCT internation	and application		
Dom (TD 0.0 (0.0 0.0			
on 10 January 20	JU3		
and was amended under PCT	Article 19		
	Aitiolo 10		(if applicable)
on —			(if applicable).
I hereby state that I have revie claims, as amended by any an		ents of the above-identified specifica	tion, including the
I acknowledge the duty to disc Title 37, Code of Federal Regu	lose information which is mate llations, § 1.56(a).	rial to the examination of this applica	ation in accordance with
or inventor's certificate or of ar States of America listed below any PCT international applicat	by PCT international application and have identified below any ion(s) designating at least one	States Code, § 119 of any foreign a n(s) designating at least one country foreign application(s) for patent or i country other than the United State the application(s) of which priority i	y other than the United inventor's certificate or s of America filed by me
PRIOR FOREIGN/PCT APPLI	CATION(S) AND ANY PRIOR	ITY CLAIMS UNDER 35 U.S.C. 119):
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	02075209.3	17 January 2002	YES
Europe	02077992.2	22 July 2002	YES
	116	DEPARTMENT OF COMMERCE -Pate	ant and Trademarks Office

		<u>. </u>				
	Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number (Includes Reference to PCT International Applications) Attorneys Docket Number PHNL020651 US					
POWI all bus	ER OF ATTORNE iness in the Patent a	Y: As a named inventor, I hereby appoint and Trademark Office connected therewith	the following attorney(s) and/o. (List name and registration n	or agent(s) to pros umber)	ecute this application and transact	
Jack I	Jack E. Haken, Reg. No. 26,902 Direct Telephone Calls to:					
Michael E. Marion, Reg. No. 32, 266			<i>5)</i>	(name and telephone number)		
Edward M. Blocker, Reg. No. 30,245			7	(914)332-02	22	
U	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME	
•	INVENTOR	<u>HENDRIKS</u>	Bernardus		Hendrikus Wilhelmus	
201	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COU		COUNTRY OF CITIZENSHIP	
		Eindhoven	The Netherlands	MLX	The Netherlands	
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY	
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhove	en	The Netherlands	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME		SECOND GIVEN NAME	
202		DE VRIES	Jorrit		Ernst	
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP	
	CITIZENSHIP	Eindhoven	The Netherlands		The Netherlands	
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY	
-	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhove	en l	The Netherlands	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	
DATE 08 August 2003	DATE	

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(July 1994)

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications) Attorneys Docket Number PHNL020651 US				
			opoint the following attorney(s) and/or agent(s) rewith. (List name and registration number)	to prosecute this application and transact
Mich	E. Haken, Reg. No nel E. Marion, Re rd M. Blocker, Ro	g. No. 32, 266	(name ar	lephone Calls to: d telephone number) 32-0222
ί	FULL NAME OF INVENTOR	FAMILY NAME HENDRIKS	FIRST GIVEN NAME Bernardus	SECOND GIVEN NAME Hendrikus Wilhelmus
201	RESIDENCE & CITIZENSHIP	CITY Eindhoven	The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
J	FULL NAME OF INVENTOR	FAMILY NAME DE VRIES	FIRST GIVEN NAME Jorrit	SECOND GIVEN NAME Ernst
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands NL	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202
	de Mais
DATE	DATE
	07 August 2003

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(July 1994)

PTO/S8/80 (12-03)

Approved for use through 11/30/2005. OMB 0651-0035

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby appoint:			
X Practitioners associated with the Customer N OR	lumber: 24737		
Practitioner(s) named below (if more than ten	patent practitioners are to be na	med, then a customer nu	Imber must be used):
Name		Registration Nu	
as attomey(s) or agent(s) to represent the undersigned any and all patent applications assigned only to the undersided to this form in accordance with 37 CFR 3.73	ed before the United States Pater indersigned according to the USF (b).	nt and Trademark Office PTO assignment records	(USPTO) in connection with or assignment documents
Assignee Name and Address: Koninklijke Philips Electro	onias N.V		
Groenewoudseweg 1 5621 BA Eindhoven, The Neth			
A copy of this form, together with a state required to be flied in each application in may be completed by one of the practition authorized to act on behalf of the assignation as to be flied.	willer this form is used	. The statement u	nder 37 CFR 3.73(b)
Si	GNATURE of Assigner of Reco	and .	
ine individual whose signature and	title is supplied below is author	ized to act on behalf of t	he assignee
Matthieu van Kaan	<u></u>	Date //	
itle Authorized Representati		Telephone (91	Millg 2004 4) 333-9600
his collection of information is required by 37 12 Ht 1.31 and 1			-,000 5000

This collection of information is required by 37 (CPI 1.31 and 1.33). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. P.O. Box 1450, Alexandria VA 22313-1450. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMEN	T UNDER 37 CFR 3.73(b)	
Applicant/Patent Owner: Koninklijke Philips Electronics N.V.		
Application No./Patent No.: Concurrently F	iled/Issue Date: Concurrently	
Entitled: OPTICAL SCANNING DEVICE		
	corporation	
(Name of Assignee)	(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)	
states that it is: 1. It is the assignee of the entire right, title, and interest;	or .	
2. an assignee of less than the entire right, title and The extent (by percentage) of its ownership intere in the patent application/patent identified above by virtue	est is ———— %	
	application/patent identified above. The assignment was recorded at Reel, Frame, or for which a copy thereof is	
OR		
B. [] A chain of title from the inventor(s), of the patent a below:	application/patent identified above, to the current assignee as shown	
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The undersigned (whose title is supplied below) is author	orized to act on behalf of the assignee.	
<u> </u>	Russell Gross, Reg. 40,007	
Date	Typed or printed game	
(914) 333-9619	game gorsa	
· Telephone number	Signature	
	Corporate Counsel	
	Title	

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